Vermont Health Connect Update

Medicaid & Exchange Advisory Board Monday, March 23, 2015



Overview

- 2016 Standard Qualified Health Plan (QHP) Changes
- 1095-A Corrections Update
- Assister Summit
- Operations Update and Metrics



Vermont Health Connect 2016 Standard Qualified Health Plan (QHP) Changes



2016 Plan Design Changes: Objectives

- Maintain 2015 plan designs with minimal changes. Some proposed changes require Green Mountain Care Board (GMCB) approval
- Incorporate plan designs using 2016 Actuarial Value (AV) calculator
- Aim for lower end of required AV range to minimize anticipated premium impact, balanced with minimizing changes
- Minimize consumer cost impact from changes: balance necessary increases between deductibles and service cost-shares
- Avoid increases to primary care cost-share wherever possible
- Maintain incentives to utilize lower cost generic Rx



VHC 2016 QHPs: Additional Notes

- No changes were required to standard platinum and gold plans for 2016
- Silver and bronze plans do require changes in costshare according to the 2016 AV calculator
- The following silver and bronze deductible and High Deductible Health Plans (HDHP) have been proposed to GMCB
- Approval completed March 19



State of Vermont 2016 Standard Plan Designs	Silver Deductible Plan Design Options				
Deductible/OOP Max	Silver 2015 Plan Design	Silver 2016 Proposed Design			
Description of Alternative		Keep PCP/MH copay at 2015 level, increase Rx Deductible to offset			
General Comments		Deductible does not apply to office visits and generic drugs			
Pros of Alternative		Increasing Rx deductible and brand copay will further incent generic util; higher spc OV will also incent more PCP utilization			
Cons of Alternative		Large MOOP increase for high cost members; drug getting a higher proportional increase in cost sharing than medical services for moderate to low cost members but drug benefit is currently richer than medical			
Type of Plan	Deductible	Deductible			
Medical Ded	\$1,900	\$2,000			
Rx Ded	\$100	\$150			
Integrated Ded	No	No			
Medical OOPM	\$5,100	\$5,600			
Rx OOPM	\$1,250	\$1,250			
Integrated OOPM	No	No			
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual			
Medical Deductible waived for:	Prev, OV, UC, Amb	Prev, OV, UC, Amb			
Drug Deductible waived for:	Generic scripts	Generic scripts			
Service Category	Copay / Coinsurance	Copay / Coinsurance			
Inpatient ¹	40%	40%			
Outpatient ²	40%	40%			
ER ³	\$250	\$250			
Radiology (MRI, CT, PET)	40%	40%			
Preventive	\$o	\$o			
PCP Office Visit	\$25	\$25			
MH/SA Office Visit	\$25	\$25			
Specialist Office Visit ⁴	\$45	\$50			
Urgent Care	\$60	\$60			
Ambulance	\$100	\$100			
Rx Generic	\$12	\$15			
Rx Preferred Brand Rx Non-Preferred Brand	\$50 - 01/	\$60			
Actuarial Value	50%	50%			
2015 Federal AVC, Unadjusted	71.5%	N/A			
2015 Federal AVC, Adjusted if Necessary	71.5%	N/A			
2016 Final Federal AVC, Unadjusted	73.1%	71.6%			
2016 Final Federal AVC, Adjusted if Necessary	73.1%	71.6%			

2016 Silver Deductible Plan Changes & CSRs

	Medical Deductible	Rx Deductible	Medical MOOP	Specialist Office Visit	Rx Generic	Rx Pref. Brand
Non-CSR	\$2,000	\$150	\$5,600	\$50	\$15	(\$60)
	(+ \$100)	(+ \$50)	(+ \$500)	(+ \$5)	(+ \$3)	(+ \$10)
73% AV (250–300)	\$2,000 (+ 100)	\$150 (+ \$50)	\$4,500 (+ \$500)	\$50 (+ \$5)	\$15 No Change	(\$60) (+\$10)
77% AV	\$1,600	\$150	\$3,400	\$40	\$12	(\$60)
(200-250)	(+ \$100)	(+ \$50)	(+ \$400)	No Change	No Change	(+\$10)
79% AV (Pending)	\$1,250	\$100	\$2,900	\$40	\$12	\$60
83% AV (Pending)	\$1,000	\$100	\$2,250	\$30	\$12	\$50
87% AV	\$600	\$100	\$1,250	\$30	\$10	\$50
(150 -200)	No Change	No Change	No Change	No Change	No Change	No Change
94% AV	\$100	\$0	\$500	\$15	\$5	\$20
(133–150)	No Change	No Change	No Change	No Change	No Change	No Change



State of Vermont 2016 Standard Plan Designs	Bronze Deductible Plan Design Options			
Deductible/OOP Max	Bronze 2015 Plan Design	Bronze 2016 Proposed Design		
Description of Alternative		Keep PCP/MH and Rx Generic copays at 2015 level, Increase Rx Deductible to offset		
General Comments		Deductibles apply to all services/scripts so the coin/copays are not a factor until the ded has been met		
Pros of Alternative		Increasing Rx deductible instead of generic copay will incent more generic use		
Cons of Alternative		Large Ded/MOOP increases impact high cost members; Drug getting a higher proportional increase in cost sharing than medical services for moderate cost members but drug benefit is currently richer than medical		
Type of Plan	Deductible	Deductible		
Medical Ded	\$3,500	\$4,000		
Rx Ded	\$300	\$500		
Integrated Ded Medical OOPM	No \$6.050	No		
Rx OOPM	\$6,350 \$1,250	\$6,850 \$1,250		
Integrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes		
Family Deductible / OOP	Stacked, 2x Individual	Stacked, 2x Individual		
Medical Deductible waived for:	Preventive	Preventive		
Drug Deductible waived for:	Applies to all scripts	Applies to all scripts		
Service Category	Copay / Coinsurance	Copay / Coinsurance		
Inpatient ¹	50%	50%		
Outpatient 2	50%	50%		
Outpatient ²	50%			
ER ³	50%	50%		
		50% 50%		
ER ³	50%	_		
ER ³ Radiology (MRI, CT, PET)	50% 50%	50%		
ER ³ Radiology (MRI, CT, PET) Preventive	50% 50% \$0	50% \$0		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit	50% 50% \$0 \$35	50% \$0 \$35		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit	50% 50% \$0 \$35 \$35 \$80	50% \$0 \$35 \$35		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴	50% 50% \$0 \$35 \$35 \$80 \$100	50% \$0 \$35 \$35 \$85 \$100		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care Ambulance	50% 50% \$0 \$35 \$35 \$80 \$100	50% \$0 \$35 \$35 \$85 \$100 \$100		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care	50% 50% \$0 \$35 \$35 \$80 \$100	50% \$0 \$35 \$35 \$85 \$100		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care Ambulance Rx Generic Rx Preferred Brand	50% 50% \$0 \$35 \$35 \$80 \$100 \$100 \$20 \$80	50% \$0 \$35 \$35 \$35 \$85 \$100 \$100 \$20 \$80		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care Ambulance Rx Generic	50% 50% \$0 \$35 \$35 \$80 \$100 \$100	50% \$0 \$35 \$35 \$35 \$85 \$100 \$100 \$20		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care Ambulance Rx Generic Rx Preferred Brand Rx Non-Preferred Brand	50% 50% \$0 \$35 \$35 \$80 \$100 \$100 \$20 \$80	50% \$0 \$35 \$35 \$35 \$85 \$100 \$100 \$20 \$80		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care Ambulance Rx Generic Rx Preferred Brand Rx Non-Preferred Brand Actuarial Value	50% 50% \$0 \$35 \$35 \$80 \$100 \$100 \$20 \$80 60%	50% \$0 \$0 \$35 \$35 \$35 \$85 \$100 \$100 \$20 \$80 60%		
ER ³ Radiology (MRI, CT, PET) Preventive PCP Office Visit MH/SA Office Visit Specialist Office Visit ⁴ Urgent Care Ambulance Rx Generic Rx Preferred Brand Rx Non-Preferred Brand Actuarial Value 2015 Federal AVC, Unadjusted	50% 50% \$0 \$35 \$35 \$35 \$80 \$100 \$100 \$20 \$80 60%	50% \$0 \$35 \$35 \$35 \$85 \$100 \$100 \$20 \$80 60%		

ate of Vermont M6 Standard Plan Designs	Silver HDHP Design Options					
eductible/OOP Max	Silver HDHP 2015 Plan Design	Silver HDHP 2016 Proposed Design Option 1	Silver HDHP 2016 Proposed Design Option 2			
escription of Alternative		Option #1: Embedded MOOP	Option #2: Stacked MOOP			
eneral Comments		Option if carriers can administer an embedded MOOP; 25% coin needed to limit MOOP increase for CSRs	Option if carriers can not administer an embedded MOOP - Silver CSRs will need to change, larger impact on AV compared to 2015, more difficult to understand than current; 25% coin needed to limit MOOP increase for CSRs			
ros of Alternative		Lower Deductible	Minimal changes compared to 2015			
ons of Alternative		Somewhat higher AV than 2015 which could result in an additional premium increase	Somewhat higher AV than 2015 which could result in an additional premium increase			
pe of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HDHP			
edical Ded	\$1,550	\$1,425	\$1,550			
: Ded	\$1,300	\$1,300	\$1,300			
tegrated Ded	Yes	Yes	Yes			
edical OOPM	\$5,750	\$5,750	\$5,750			
OOPM	\$1,300	\$1,300	\$1,300			
tegrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Yes			
mily Deductible / OOP	Aggregate, 2x Individual	Aggregate with Combined Medical/Rx embedded \$6,850 Single MOOP; 2x Individual	Ded and Rx MOOP- Aggregate, Combined Medical/Rx MOOP - Stacked; 2x Individual			
edical Deductible waived for:	Preventive	Preventive	Preventive			
ug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scripts			
ervice Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance			
patient 1	20%	25%	25%			
itpatient ²	20%	25%	25%			
3	20%	25%	25%			
diology (MRI, CT, PET)	20%	25%	25%			
eventive	0%	0%	0%			
CP Office Visit	10%	10%	10%			
H/SA Office Visit	10%	10%	10%			
ecialist Office Visit ⁴	20%	25%	25%			
gent Care	20%	25%	25%			
nbulance	20%	25%	25%			
Generic	\$10	\$10	\$10			
Preferred Brand	\$40	\$40	\$40			
Non-Preferred Brand	50%	50%	50%			
ctuarial Value						
15 Federal AVC, Unadjusted	70.3%	N/A	N/A			
15 Federal AVC, Adjusted if Necessary	68.7%	N/A	N/A			
16 Final Federal AVC, Unadjusted	72.9%	72.5%	71.9%			
16 Final Federal AVC, Adjusted if eccessary	70.9%	70.1%	70.1%			

rederal HDHP MOOP limits are not yet released for 2016. The 2015 single limit is \$6,450 and on average increases around \$100 a year.

2016 Silver HDHP Cost-Share Changes: 73% CSR

	Medical Deductible	Medical MOOP	Inpatient, Outpatient, ER, Radiology, Specialist, Urgent Care, Ambulance	Rx Generic	Rx Pref. Brand
2015	\$1,400	\$3,400	20%	\$10	\$40
2016 Option 1	\$1,425 (+ \$25)	\$3,800 (+ \$400)	25% (+ 5%)	\$10 No Change	\$40 No Change
2016 Option 2	\$1,550 (+ \$150)	\$4,250 (+ \$850)	25% (+ 5%)	\$10 No Change	\$40 No Change



2016 Silver HDHP Cost-Share Changes: 77% CSR

	Medical Deductible	Medical MOOP	Inpatient, Outpatient, ER, Radiology, Specialist, Urgent Care, Ambulance	Rx Generic	Rx Pref. Brand
2015	\$1,300	\$2,500	20%	\$5	\$30
2016 Option 1	\$1,300 No Change	\$2,700 (+ \$200)	25% (+ 5%)	\$10 (+ \$5)	\$40 (+ \$10)
2016 Option 2	\$1,400 (+ \$100)	\$3,100 (+ \$600)	25% (+ 5%)	\$10 (+ \$5)	\$40 (+ \$10)



2016 Silver HDHP Cost-Share Changes: 79% CSR (Pending)

	Medical Deductible	Medical MOOP	Inpatient, Outpatient, ER, Radiology, Specialist, Urgent Care, Ambulance	Rx Generic	Rx Pref. Brand
2016 Option 1	\$1,300	\$2,400	20%	\$5	\$15
2016 Option 2	\$1,300	\$2,900	20%	\$5	\$15



2016 Silver HDHP Cost-Share Changes: 83% CSR (Pending)

	Medical Deductible	Medical MOOP	Inpatient, Outpatient, ER, Radiology, Specialist, Urgent Care, Ambulance	Rx Generic	Rx Pref. Brand
2016 Option 1	\$1,300	\$1,650	10%	\$5	\$10
2016 Option 2	\$1,300	\$2,000	10%	\$5	\$10



2016 Silver HDHP Cost-Share Changes: 87% CSR

	Medical Deductible	Medical MOOP	Inpatient, Outpatient, ER, Radiology, Specialist, Urgent Care, Ambulance	Rx Generic	Rx Pref. Brand
2015	\$1,000	\$1,000	0%	\$0	\$0
2016 Option 1	\$1,150 (+ \$150)	\$1,150 (+ \$150)	0% No Change	\$0 No Change	\$0 No Change
2016 Option 2	\$1,200 (+ \$200)	\$1,200 (+ \$200)	0% No Change	\$0 No Change	\$0 No Change



2016 Silver HDHP Cost-Share Changes: 94% CSR

	Medical Deductible	Medical MOOP	Inpatient, Outpatient, ER, Radiology, Specialist, Urgent Care, Ambulance	Rx Generic	Rx Pref. Brand
2015	\$450	\$450	0%	\$0	\$0
2016	\$500	\$500 (+ \$50)	0%	\$0	\$0
Option 1	(+\$50)		No Change	No Change	No Change
2016	\$500	\$500 (+ \$50)	0%	\$0	\$0
Option 2	(+ \$50)		No Change	No Change	No Change



ate of Vermont On 6 Standard Plan Designs Bronze HDHP Plan Design Options				
Deductible/OOP Max	Bronze 2015 Plan Design	Bronze HDHP 2016 Proposed Design Option 1	Bronze HDHP 2016 Proposed Design Option 2	
Description of Alternative		Option #1: Embedded MOOP	Option #2: Stacked MOOP	
General Comments		Option if carriers can administer an embedded MOOP - less impact to plan designs than stacked MOOP	Option if carriers can not administer an embedded MOOP larger impact on AV compared t 2015; more difficult to understan than current	
Pros of Alternative		Complies with federal requirements	Complies with federal requiremen	
Cons of Alternative		High deductible but no alternative due to new federal regulation	Larger impact on deductible	
Type of Plan	HSA Q/HDHP	HSA Q/HDHP	HSA Q/HD	
Aedical Ded	\$2,000	\$4,100	\$4,4	
kx Ded	\$1,300	\$1,300	\$1,3	
ntegrated Ded	Yes	Yes	Y	
Aedical OOPM	\$6,250	\$6,500	\$6,5	
x OOPM	\$1,300	\$1,300	\$1,3	
ntegrated OOPM	Rx -No, Medical - Yes	Rx -No, Medical - Yes	Rx -No, Medical - Y	
family Deductible / OOP	Aggregate, 2x Individual	Aggregate with Combined Medical/Rx embedded \$6,850 Single MOOP; 2x Individual	Ded and Rx MOOP- Aggregate, Combined Medical/Rx MOOP - Stacked; 2x Individual	
Aedical Deductible waived for:	Preventive	Preventive	Prevent	
orug Deductible waived for:	Wellness scripts	Wellness scripts	Wellness scri	
Service Category	Copay / Coinsurance	Copay / Coinsurance	Copay / Coinsurance	
npatient ¹	50%	50%	59	
Outpatient ²	50%	50%	5	
ER ³	50%	50%	59	
adiology (MRI, CT, PET)	50%	50%	59	
reventive	ο%	0%		
CP Office Visit	50%	50%	59	
/IH/SA Office Visit	50%	50%	5	
specialist Office Visit ⁴	50%	50%	59	
Jrgent Care	50%	50%	59	
mbulance	50%	50%	59	
x Generic	\$12	\$12	4	
x Preferred Brand	40%	40%	40	
x Non-Preferred Brand	60%	60%	60	
Actuarial Value				
:015 Federal AVC, Unadjusted	63.6%	N/A	N	
:015 Federal AVC, Adjusted if Necessary	60.9%	N/A	N	
016 Final Federal AVC, Unadjusted	65.5%	61.4%	61.:	

2016 Final Federal AVC, Adjusted if 63.5% 61.0% 61.

Federal HDHP MOOP limits are not yet released for 2016. The 2015 single limit is \$6,450 and on average increases around \$100 a year.



- The first two batches of corrected 1095-A forms, plus about 180 new ones that were ready (2,034), were mailed on March 6.
- 366 notices were mailed on March 13.
- They continue to go out in weekly batches as needed on Fridays.



- New FAQs on 1095-As and tax filing have been distributed to tax professionals and to the public and posted on our website.
- An informal "Reconsideration Process" is available for customers who dispute their 1095-As.
- The Reconsideration Process is more efficient for customers because it specifically addresses 1095-A issues and is a paper review, rather than a formal hearing.



- VHC does not anticipate further delays on sending corrected 1095-As.
- Most 1095-A Corrections do not necessitate a CoC.
- Anticipated turn-around is 2-3 weeks for COCs, plus time for the corrected form to go out in the next batch.



- IRS has been suggesting two options for taxpayers who are awaiting corrected 1095-A forms and are concerned about filing late:
 - 1) File for an extension and pay estimated income tax due, OR
 - 2) File taxes now, then amend return with a corrected 1095-A.
- Important IRS announcement last Friday (March 20)
 - Taxpayers won't have to amend a return if corrected 1095 A comes after they file
 - If the corrected form would benefit them, taxpayers will still have the option to amend their return
 - More details to follow

Assister Program



Assister Summit

- To be held on April 6, 2015
- In Barre, Vermont
- Formal Announcement this week
- Bob Skowronski will join for a working lunch
- Please direct questions to
 - Brady Hoffman, Assister Program Director



Operations Update and Metrics



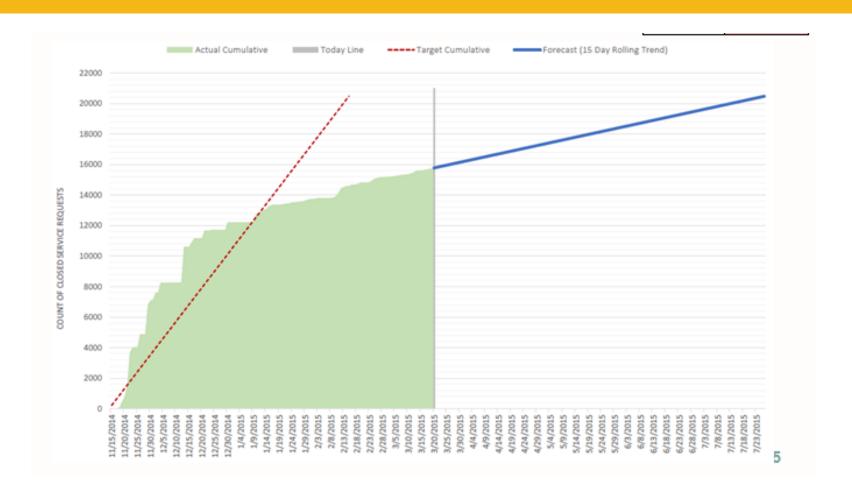
Key Milestones

Key Milestones Announced by the Governor Friday:

- End of May COC Functionality
- October Customer service staff will process changes that are reported by the 15th day of a month in time for next invoice
- October Renewal Functionality



Open Enrollment Progress Tracking





Renewals

Active 2015 Renewals							
	Open Processed in VHC System, Awaiting Integration (Lion's Den)						
Renewal Cases by Type	as of 3/17	as of 2/17	Change	as of 3/17	as of 2/17	Change	
No-Change Renewals	74	1,312	-1,238	N/A	N/A	N/A	
Eligibility/Plan Change Renewals	2,890	4,683	-1,793	2,545	1,634	+911	
Other - Age-offs and Program Change	106	339	-233	917	1,039	-122	
Total Renewal Cases	3,070	6,334	-3,264	3,462	2,673	+789	



Change of Circumstance

Active 2015 Change of Circumstance								
Change of Circumstance	Open			Processed in VHC System, Awaiting Integration (Lion's Den)				
	as of 3/17	as of 2/17	Change	as of 3/17	as of 2/17	Change		
Change of Circumstance (COC) Cases	6,647	6,515	+132	1,257	458	+799		



Lion's Den

- With end of open enrollment, we've added new capacity to process change requests.
 - Maximus began working CoCs in February.
 - By training all staff on COCs, HAEU is effectively expanding COC-processing team from 16 to 60+.
 - Has paid off in processing, but integration in Lion's Den has remained a challenge



Lion's Den

- New resources added to double the capacity of Lion's Den.
- Lion's Den's move to Essex is being accelerated.

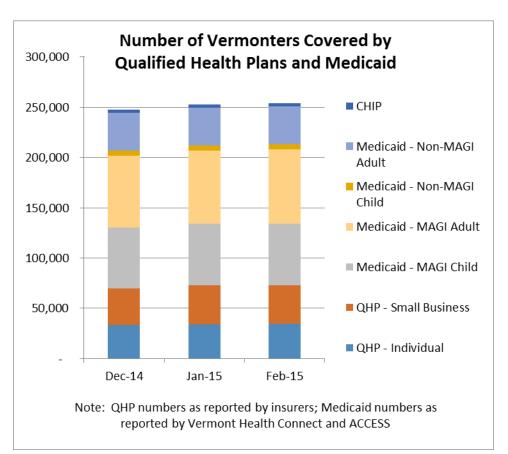


Special Enrollment Periods

- In addition to "typical" qualifying events, there are Special Enrollment Periods this spring for:
 - Vermonters who learn about the new federal fee when they file their taxes.
 - Customers whose eligibility changed in 2015, who received their eligibility determination after open enrollment ended, and now wish to change their plan.



Coverage



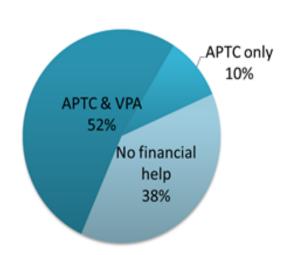
Number of Vermonters Covered by Insurance Type							
	Dec-14	Jan-15	Feb-15				
QHP - Individual	33,027	34,038	34,693				
QHP - Small Business	36,488	38,543	38,312				
Medicaid - MAGI Child	61,013	61,193	61,142				
Medicaid - MAGI Adult	70,980	72,749	74,071				
Medicaid - Non-MAGI Child	5,083	5,064	5,026				
Medicaid - Non-MAGI Adult	37,527	37,616	37,610				
CHIP	3,216	3,240	3,223				
ALL QHP	69,515	72,581	73,005				
ALL MEDICAID & CHIP	177,819	179,862	181,072				

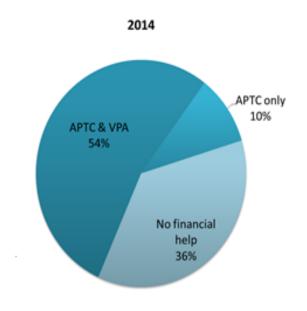


Financial Help

Customers in Private Health Plans (QHP) Receiving Financial Help to Make Health Coverage More Affordable

2015



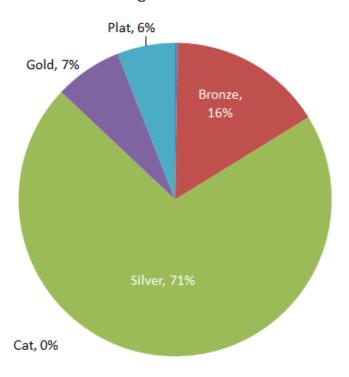




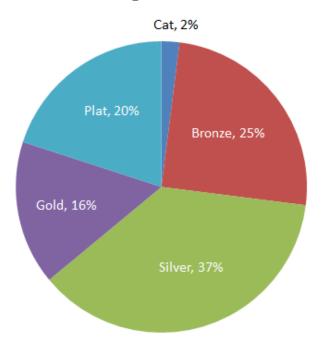
Plan Selection

2015 Metal Level Confirmed

CSR-Eligible Individuals



2015 Metal Level Confirmed CSR-Ineligible Individuals



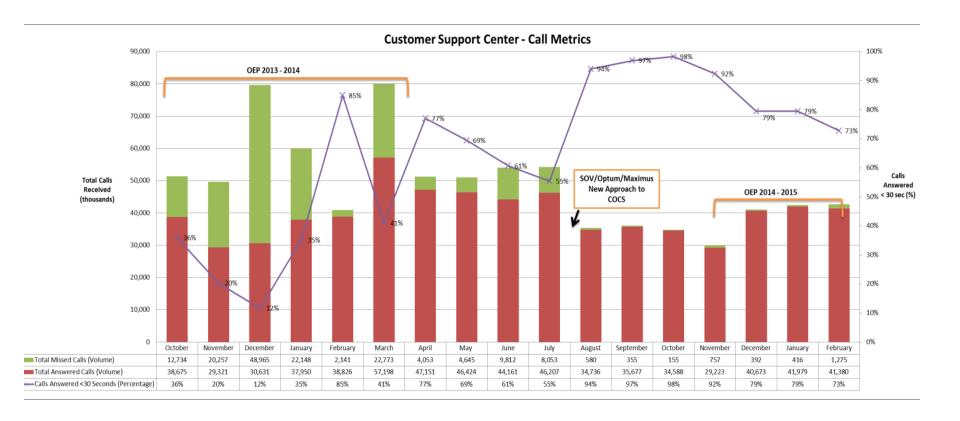


Customer Support Center

Metric	Feb. 2015	Month Before (Jan. 2015)	Two Months Before (Dec. 2014)	12 Months Before (Feb. 2014)
Total Inbound Calls	42,655	42,395	41,157	40,967
Answered Calls	41,380	41,979	40,765	38,826
Abandon Rate	3.0%	0.9%	0.9%	5.2%
Calls answered in < 30 seconds	73%	84%	87%	85%

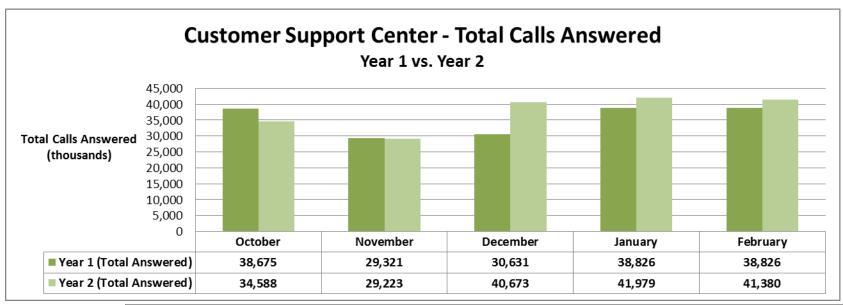


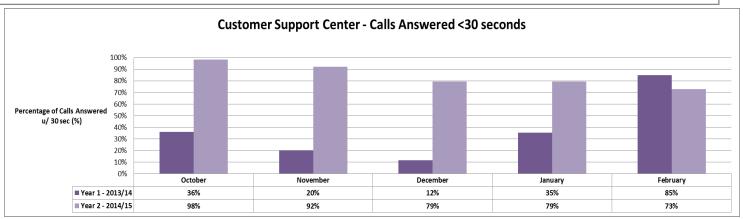
Customer Support Center





Customer Support Center







Contact Us

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